

UNITED STATES NATIONAL STAGE WORKSHEET (DO/EO)

U. S. Application No. 10/519619 Charitta Burt, Paralegal

Publication Date \_\_\_\_\_

Publication No. WO 1 PCT/RO/101 \_\_\_\_\_

Copy of ISR 99, Copy of IPER 98

Assignee information:

Priority Info: Country FI No. 20071326 date 7.5.02 MORE (turn over)

Correspondence checked: 25944

Inventor Name checked: F \_\_\_\_\_ L \_\_\_\_\_

Inventor Residence city: \_\_\_\_\_, state and/or country \_\_\_\_\_ citizenship: \_\_\_\_\_

International Application No. PCT \_\_\_\_\_ / \_\_\_\_\_ Language \_\_\_\_\_

Copy of ISR: \_\_\_\_\_

Copy in International Application: ✓, Translation: yes no spec. page no. \_\_\_\_\_

371 Filing Fees: 900; meets Art. 33(2)-(3) Low fee applies: \_\_\_\_\_

Total Claims: 16 Chargeable 16 Independent 2 multiple 16

Number of drawing Sheets: 1 Foreign language: \_\_\_\_\_

Oath/Declaration: \_\_\_\_\_; signed \_\_\_\_\_ unsigned \_\_\_\_\_ defective \_\_\_\_\_ completed \_\_\_\_\_

Small entity fee: \_\_\_\_\_; SME papers: yes no \_\_\_\_\_

Bio Seq. Diskette: \_\_\_\_\_ entered \_\_\_\_\_ Bio Seq. Listing: \_\_\_\_\_ statement \_\_\_\_\_

References \_\_\_\_\_

Copy of IPER: ✓; Annexes: ✓ entered ✓ not entered \_\_\_\_\_

Preliminary Amendment(s): ✓ date: \_\_\_\_\_; 2<sup>nd</sup> amendment date: \_\_\_\_\_

IDS: ✓ DATE: 12/30/05 2<sup>nd</sup> DATE: \_\_\_\_\_

Request for Immediate Examination: \_\_\_\_\_

Substitute Specification: \_\_\_\_\_ date: \_\_\_\_\_

Assignment: \_\_\_\_\_ forwarded to Assignment branch date: \_\_\_\_\_

Priority Document(s): ✓ date 12/30/04; Number of copies included \_\_\_\_\_

Power of Attorney: \_\_\_\_\_

Abstract: ✓, Article 19 Amendment: \_\_\_\_\_; replaced by Article 34 Amdt. \_\_\_\_\_

Date of 35 USC Receipt of Request: 12/30/04 Notes: \_\_\_\_\_

Date Completion USC 371 Requirements: \_\_\_\_\_

Notice of Missing Requirements: 7/22/05

Notice of Defective Response: \_\_\_\_\_

Notice of Acceptance: \_\_\_\_\_

Notice of Abandonment: \_\_\_\_\_ Petition to Revive: \_\_\_\_\_; Petition 1.47: \_\_\_\_\_

Other forms: \_\_\_\_\_ Extension of time: Number of months \_\_\_\_\_